

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AK</i>	<i>6264</i>	<i>8/17/00</i>
O.I.P.E. CLASSIFIER		<i>10</i>	<i>8-22-00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<i>646125</i>	<i>9-21-01</i>

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	3-10-2001
2	✓	✓	8-19-2001
3	✓	✓	8-4-2004
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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